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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/590,585 | 06/08/2000 | Simon J. Mantell | PC10334A | 1013 |

23913 7590 02/04/2005

PFIZER INC
150 EAST 42ND STREET
5TH FLOOR - STOP 49
NEW YORK, NY 10017-5612

EXAMINER

MCINTOSH III, TRAVISS C

ART UNIT PAPER NUMBER

1623

DATE MAILED: 02/04/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

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| APPLICATION NO./ CONTROL NO. | FILING DATE | FIRST NAMED INVENTOR / PATENT IN REEXAMINATION | ATTORNEY DOCKET NO. |
|---------------------------------|-------------|---|---------------------|
|---------------------------------|-------------|---|---------------------|

09/590,585

6/8/2000

Mantell et al.

PC103344

EXAMINER

Travis C. McIntosh

ART UNIT

PAPER

1623

01312005

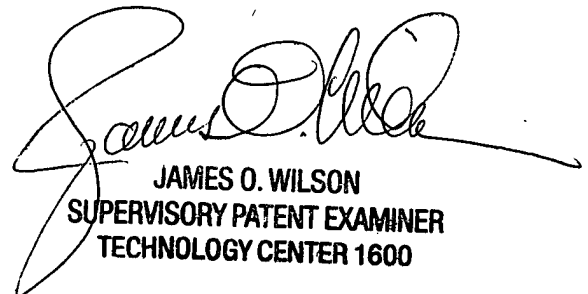
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Commissioner for Patents

Claim 30 has been canceled.

No response to this communication is required by applicants.



JAMES O. WILSON
SUPERVISORY PATENT EXAMINER
TECHNOLOGY CENTER 1600

| | | | |
|---|------------------------|---------------------|--|
| Response to Rule 312 Communication | Application No. | Applicant(s) | |
| | 09/590,585 | MANTELL ET AL. | |
| | Examiner | Art Unit | |
| | Traviss C McIntosh | 1623 | |

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

1. ☒ The amendment filed on attached PTO-90C under 37 CFR 1.312 has been considered, and has been:

a) ☒ entered.

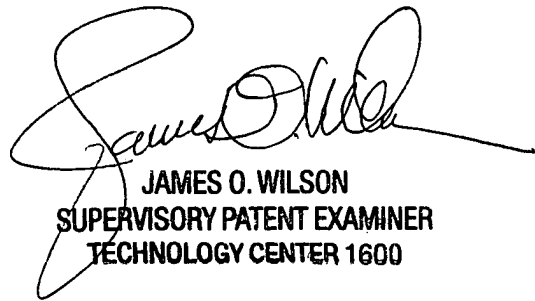
b) ☐ entered as directed to matters of form not affecting the scope of the invention.

c) ☐ disapproved because the amendment was filed after the payment of the issue fee.

Any amendment filed after the date the issue fee is paid must be accompanied by a petition under 37 CFR 1.313(c)(1) and the required fee to withdraw the application from issue.

d) ☐ disapproved. See explanation below.

e) ☐ entered in part. See explanation below.


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